



Review of Mandatory Obligations on Health Insurers

Status of Review



The following highlights the status of the review of identified mandatory obligations on health insurers required by Utah Code Ann. § 36-12-5(2). This is not a comprehensive analysis of the specific reviews which have been or will be conducted. For further information, please contact the Office of Legislative Research and General Counsel.

Summary of Statutory Requirements:

- Subject to the direction of Legislative Management, the Business and Labor Interim Committee and the Health and Human Services Interim Committee are to identify and review mandates in Title 31A, Insurance Code, on health insurers:
 - with respect to coverage, benefits, and providers;
 - that have been in effect for 5 years and not reviewed within 10 years; and
 - to determine whether the mandates should be continued, modified, or repealed.
- The review shall include:
 - estimated fiscal impact of the provision on state and private health insurance; and
 - the purposes and effectiveness of the provision.
- Mandates enacted before July 1, 2000 are to be reviewed by November 30, 2005.
- Mandates enacted after July 1, 2000 are to be reviewed on the fifth year after enactment.

Plan for Reviews:

The chairs of the Business and Labor Interim Committee and the Health and Human Services Interim Committee outlined for Legislative Management a plan for conducting the reviews of mandates required to be completed by November 2005. The plan included the following.

- The expertise of the Department of Insurance would be used to complete the reviews.
- The Health and Human Services Interim Committee would complete as many reviews as possible within the existing budget of the Department of Insurance.
- The Health and Human Services Interim Committee would forward the results of the review to the Business and Labor Interim Committee.

Mandates Identified by Health and Human Services:

As of May 23, 2001, the Health and Human Services Interim Committee had identified 25 mandates affecting coverage, benefits, or providers. Of the 25 mandates:

- 18 are state mandates
- 7 are federal mandates

Mandates Reviewed by Health and Human Services:

REVIEWS CONDUCTED		
Mandate	When Studied	Results of Review
Diabetes (Utah Code Ann. § 31A-22-626)	2003 Interim	Repeal of Repeal Date
Minimum adoption indemnity benefit (Utah Code Ann. § 31A-22-610.1)	2003 Interim	H.B. 85 (2004 G.S.) increasing indemnity benefit and making other changes
Catastrophic coverage of mental health conditions (Utah Code Ann. § 31A-22-625)	2004 Interim	No action to date

PLANED REVIEWS	
Mandate	When to be Studied
Dependent coverage to age 26 (Utah Code Ann. § 31A-22-610.5)	2005 Interim

Dietary products for inborn metabolic errors (Utah Code Ann. § 31A-22-623)	2005 Interim
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